

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**PAGE 1 OF 1  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>NEVER BACK DOWN, INC.</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00834077	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>AXMEDIA</b> NATIONWIDE		Date of Public Distribution/Dissemination MM / DD / YYYY <b>04 / 16 / 2023</b>	
Mailing Address 800 W. 47TH STREET STE 200		Amount <b>20820.00</b>	
City KANSAS CITY	State MO	Zip Code 64112	Transaction ID : <b>SE24.2</b>
Purpose of Expenditure MEDIA	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY <b>04 / 17 / 2023</b>	
Name of Federal Candidate TRUMP, DONALD, J., ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>IA</u>
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2024 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>TAG LLC</b> NATIONWIDE		Date of Public Distribution/Dissemination MM / DD / YYYY <b>04 / 16 / 2023</b>	
Mailing Address PO BOX 1243		Amount <b>15000.00</b>	
City ALEXANDRIA	State VA	Zip Code 22313	Transaction ID : <b>SE24.1</b>
Purpose of Expenditure MEDIA PRODUCTION	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY <b>04 / 18 / 2023</b>	
Name of Federal Candidate TRUMP, DONALD, J., ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>IA</u>
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2024 <input type="checkbox"/> Other (specify) ▶	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<b>35820.00</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....▶	
(c) <b>TOTAL</b> Independent Expenditures.....▶	<b>35820.00</b>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

HOBBES, CABELL, , ,

[Electronically Filed]

Date

MM / DD / YYYY  
**04 / 18 / 2023**

Signature